

HEALING

NEWSLETTER

Vol. 15, No. 5
Sep. - Oct., 2000

Essential bimonthly health news for Gerson Therapy patients and health-conscious individuals - Published by the Gerson Institute

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The importance of thyroid to metabolism

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Exploring the Cancer Patient's Psyche

By Charlotte Gerson

I am not a psychologist, nor am I trained in psychology or social work. I am speaking, however, from more than 20 years' experience with cancer patients. I have seen many thousands, with widely differing racial, religious, economic, and educational differences,

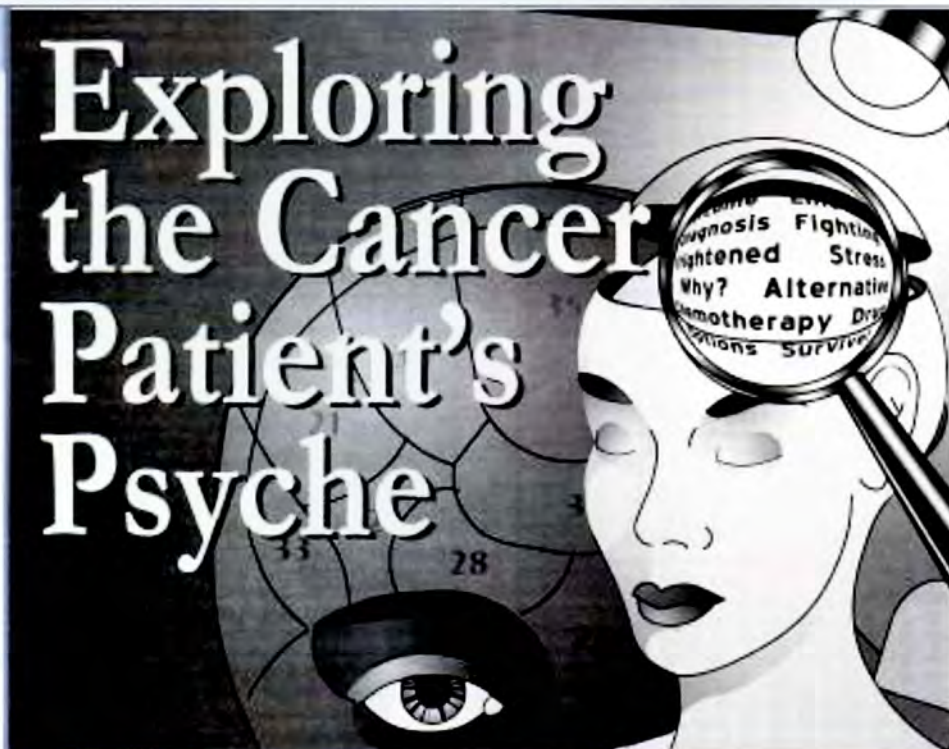
and living in many diverse cultures and countries of the world. Of course, they are still basically all human, and when they suffer from cancer, they're very human.

I have the greatest respect for the knowledge, learning, and

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GERSON
HEALING
NEWSLETTER
Vol. 15, No. 5, September - October, 2000

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The Gerson Healing Newsletter is published on a bi-monthly schedule (6 times per year) by the Gerson Institute. It is our membership lifeline, and is intended to keep both our members and the general public informed of various health issues. Turn to page 11 in this newsletter for information on becoming a member of the Gerson Institute. **Membership Form, page 11.**

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...Cancer Patient's Psyche

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experience of my very good friend, Beata Bishop. She has also helped a large number of Gerson patients with her brilliant work in psychological exploration, encouragement, and support. I am also aware of the work of Le Shan and Carl Simonton, MD, in the area of connecting a patient's emotional and psychological background to their ability to overcome cancer.

Yet the other day, one of the current patients staying at Oasis of Hope, the Gerson Hospital licensed by the Gerson Institute, confronted me quite angrily, pointing to the well-known saying that (as quoted in Beata's article found on page 29 in the **The Gerson Therapy Handbook**.) "Cancer is a socially acceptable form of suicide." She felt branded as being suicidal, branded as having purposely contracted cancer, judging from this often quoted phrase. And I'll admit that I have also heard these objections from other patients. She happens to have a kind and loving husband and theirs seems to be a very good relationship. Although I'll also admit that one never knows the deeper psychological hurts and emotions involved until one explores further.

In a way, I was glad that she was angry. She had the fighting spirit necessary to win. But I was also glad because she set me to thinking more seriously of the implications of the above statement. I was never happy to accept that idea, because it doesn't explain how many young children raised in happy homes, still develop cancer. True, the statement is not applicable to everybody. I have raised a question on that point before, and was given to understand that perhaps only 20% of cancer patients fall into that category. In my opinion, this premise is still a difficult assumption to prove.

It is also true that patients, when diagnosed with cancer, are generally deeply shocked, fright-

ened, angry, and even despairing. How can we say that they also feel satisfaction that their suicidal ideas have now materialized. Committing suicide by cancer is a slow and terrible way to go. Even if cancer shows up some 1½ years after a severe trauma, I cannot see how anybody could physically or emotionally choose to develop cancer. How would they go about doing that? Suicide implies that the person wishes to die by his own hand. Having worked with cancer patients and regularly studying how cancer develops, I must say that it takes more than two years to damage and deplete the body so severely for cancer to develop. So, my first objection to this is that it takes more than two years for cancer to develop.

My second objection to cancer as "a means of committing suicide" is that even if someone's life is emotionally, mentally, and psychologically so unbearable that the person wishes to die, how does he/she go about choosing to develop cancer in order to "commit socially acceptable suicide?" What could they do to their bodies? I have NEVER run across a person who has knowingly rubbed a carcinogen into his skin, with the intent of specifically producing cancer.

We do have the problem of stress. Many doctors feel certain that stress causes cancer. It is true, as also pointed out in Beata's article, that stress damages the immune system, weakens the defenses, and causes toxicity in the body. But even long term ongoing stress does not necessarily cause cancer. It is more often what people do because of stress: they smoke more, drink more, eat poorly, take tranquilizers or sleeping pills - which clearly damages their bodies. But even these things do not reliably cause cancer; it is NOT a prescription for suicide. Nor does the increasing incidence of cancer in children under 17 implicate the necessarily long preparation to die by "acceptable suicide" by said cancer.

True, there is one other serious

psychological problem in most cancer patients. Their whole body is toxic, its defenses and organ systems are functioning poorly, and so is the brain. Being poorly nourished and supplied with toxins, the brain cells cannot function normally and that person becomes depressed, negative, and often not able to fight. Yet I have seen a patient who had severe depression, constant panic attacks, and was unable to be left alone. She could not go outside her room, let alone her house; was on drugs, and suffering from diabetes. Yet when she was eventually diagnosed with ovarian cancer, she *wanted to live, wanted to fight*. In fact, with the help of the Gerson Therapy, she recovered completely from her depression, panic attacks, diabetes AND cancer.

In another case, as described in a book another patient wrote, *Eileen's Story*, the lady tells how she had been molested as a child, had severe emotional traumas, a difficult childhood, depression and more. Yet, when she was diagnosed with cancer, she was deeply shocked, cried all night with her husband, and was anxious to fight for her life.

It is also true that the patients we see at the Gerson Therapy hospitals are self-selected. They are there because they want to get well. But I still feel that it is virtually, if not totally, impossible to choose cancer as a form of suicide and I am unhappy researchers are making this kind of statement. I would also like to reassure the Gerson patients that, certainly in their cases, it is not true. *



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How Do I Know if I Need Thyroid?

The importance of thyroid to metabolism

By Charlotte Gerson

The thyroid gland is one of a group of "ductless glands" (hormones) in the human body. These glands secrete powerful chemicals directly into the bloodstream without going through the digestive tract or other "ducts". The thyroid gland secretes thyroxin that helps to regulate metabolism, body temperature (therefore fever), and the immune system. It also interacts with the other body hormones and controls growth and fat metabolism.

In order for the thyroid gland to produce thyroxin, it requires the input of iodine, which is the catalyst for that hormone. However, the modern diet in industrialized countries consists of many depleted, refined, and processed foods. Unfortunately, there are many areas of the world where the soil is deficient in iodine, therefore the plants are also lacking in that element. In the U.S., the population is medicated by the addition of iodine to all manufactured salt. Since salt is added to virtually every food product, iodine is sometimes oversupplied and the onset of "hyper-thyroidism" among humans is not unusual.

However, there are two chemicals in our environment, Fluorine and Chlorine, which are able to displace the iodine from the body, or the thyroid gland, and cause a thyroid deficiency. Fluorides (the combination of fluorine with sodium) is added to the municipal water supply of more than 50% of the people in the US, while chlorine is added to virtually every facility that produces and distributes water to the public. These chemicals interfere strongly with

iodine and thyroid production and are the reason for widespread low-thyroid conditions or hypothyroidism.

Hypo-thyroidism causes excess fat accumulation, lack of energy because the body is unable to burn calories, and low immune response including allergies. Plus, it causes low body temperature, poor circulation to the extremities, including cold hands and feet. Dr. Gerson found that a high percentage of his cancer patients were low in thyroid function. Dr. Broda Barnes writes in his book, *Hypothyroidism - The Unsuspected Illness*, that this problem underlies many health problems, including hypoglycemia, tuberculosis, mental diseases, heart disease and many more.

During the years of Dr. Gerson's practice, there was a method available to measure the metabolism: it was called "the Basal Metabolism Test" and simply measured the amount of oxygen a person used at complete rest, without having eaten prior to the test. This amount was then compared to "normal" individuals of the same age and sex and gave a rather accurate reading. These tests are no longer used. Instead, protein-bound iodine is tested chemically in blood samples - and again, according to Broda Barnes, that test is virtually invalid. While it tests iodine in the blood, that is not where the hormone is needed for effectiveness; it must go into the tissues, into the cell, and do its job there -- that of burning sugars to produce energy. The protein-

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How Do I Know if I Need Thyroid?

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bound iodine in the blood does not show anything. Dr. Barnes urged the following test and used it in his practice for his patients to obtain a reliable reading:

Use a regular underarm thermometer, beat the mercury down to read below 97°F, and place it on your night table. At total rest, upon waking in the morning and before getting up, place it under your arm, lie still and read it some six minutes later. Note the result, replace it once more under the arm and read it again. If it has gone up some more, replace it a second time. Then record the reading. Repeat this procedure three mornings in a row. Add the temperatures obtained, and divide by three to get your result. A normal reading should be at 98°F, ±0.2 degrees (in other words, between 97.8°F and 98.2°F). For a woman in her reproductive years, take the body temperature only on the second, third and fourth morning of the menstrual period since her body temperature varies depending on the ovulation cycle in which she finds herself.

If the result is below (or above) the normal, thyroid function is abnormal. We have seen it very low, as low as 96.3°F, in a number of patients. Dr. Barnes further directed that a person should start to take 1½ grains of thyroid if their reading is low for at least 4-6 weeks. Then repeat the test. The temperature does *not* respond rapidly; one has to wait. If the result is still low, add ½ grain every 5-6 weeks until it reaches normal - but don't exceed 5 grains.

The above directions do not apply in the practice of the Gerson Therapy for specific groups of patients, especially immune-damaged patients and cancer patients. Those patients were given thyroid (up to 5 grains a day, for 2-4 weeks together with iodine) even if their regular temperature was close to normal, in order to stimulate the metabolism. Thyroid is also essential to activate the immune system and to clear the arteries of plaque. If it is being given to patients with heart problems or high blood pressure, however, obvious care has to be taken not to overstress the heart, so the medication varies in such cases and is adjusted to each particular

patient's needs. During the two year course of the Gerson Therapy, the thyroid medication dosage is slowly reduced. If or when, at the end of the Gerson Therapy, the patient's hormone system is restored and balanced, he/she may well be able to discontinue thyroid supplementation entirely. However, many people have a genetically caused low thyroid function and may need to take a little thyroid for the rest of their lives.

Dr. Barnes gave one additional warning: while the medical profession likes to use the artificial, synthetic thyroid supplements (e.g. Thyroxin, Cytomel, Synthroid) in his experience these substances are effective only for a period of time, possibly around two years. He therefore urged, as did Dr. Gerson, the use of natural thyroid extracted from animal sources. The reason why doctors prefer the synthetic material is because they are told that it is more precisely standardized. However, over time, if the medication varies a little, that is quite unimportant and evens out. Therefore, the natural thyroid is always preferable. *

Some Recovered Patients' Stories

By Charlotte Gerson

One of our greatest satisfactions is always meeting recovered patients and telling their stories. While orthodox medicine refers to these reports as "anecdotal evidence" we still strongly feel that it is the most valuable and only point in the treatment of cancer. The point is; does the patient get well and stay well? In other words, is health re-established?

We are especially happy to present some of these former patients to the participants of our **Practitioner Training Program**™.

while studying the details and the practice of the Gerson Therapy. The former patients don't have to travel far as a number of them live right here in the San Diego area.

One of the people who graciously took time out of his busy day to tell his story to us at a recent training was Paul Scelsi; now 78 years old. In 1991, he was diagnosed with prostate cancer. He had several needle biopsies, three of those showed positive malignant cells, three were negative. His Prostate-Specific Antigen, a marker

for prostate cancer (PSA), showed 6 - not very elevated, but above normal.

Paul started the Gerson Therapy at a licensed Gerson hospital in 1991. It is interesting to note that his PSA rose at first, and at the end of three months reached 14. Needless to say, this alarms the patient. I am assuming that, since an antigen is involved, the body at first increases its defenses, raises the antigen to help reduce the malignancy. At the end of 18 months of being on the Gerson Therapy, Paul reports that his PSA had gone down to 0.3, very much in the normal range.

It turns out that Paul had spent some time in the South Pacific many years earlier and had contracted infectious jaundice (hepatitis). Later exams revealed some

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Some Recovered Patient Stories

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indentation" in his liver, damage that had not been overcome through the years.

Paul is now perfectly well, and has annual total check ups. The prostate is normal and his present PSA is 2.

I found a letter on return from my three-week lecture tour in England from another patient. She writes:

"I was at a licensed Gerson Hospital in '93. I have a lovely photo of Dr. Melendez! My malignant melanoma is long gone - glucosamine seems to be taking care of some degeneration in the spine - we are on the Barley Green, carrots and beets, and marvel at how well we feel. However, the coffee & equipment is never far from me for that occasional headache or yucky feeling. The Therapy works EVERY time! Hope this finds you very well." The letter is signed Georgia McC.

As we announced in our *Gerson Healing Newsletter*, we did a

Gerson lecture and workshop on May 21st, in Boulder, Colorado. We had a very good response from those people who stayed for the afternoon 4-hour workshop.

One of our attendees, Mr. Bob Jones, wrote a lovely letter that I would like to share with our readers:

"Dear Charlotte,
A note of appreciation for your marvelous workshop in Boulder today. Time had run out for your 5:00 PM deadline and some attendees were waiting to talk with you, so I thought it would be better to write.

"Almost 20 years ago, the Gerson Therapy brought our daughter, Susan Adams, back out of a helpless, bedridden [rheumatoid] arthritis to a reasonably normal life. (Her father stated that she is even horseback riding now.) And as for my own well-being over these past 20 years, I have been doing a daily coffee enema and a limited Gerson natural food program. The results: no sickness, no disease, and, I am still working full time as a consulting engineer at age 74.

"But I needed a new view of the Therapy, the latest developments,

and answers to my questions. And your workshop met these needs. You answered all my questions and gave me refreshing encouragement with an expanded view of the Therapy.

"I was especially impressed with your comments about the two Alzheimer patients who found substantial help with the Therapy. So, I'm ordering your *Gerson Therapy: Overview and Patient Testimonials (Volume 1)* video to loan to a friend whose wife has just been diagnosed as with Alzheimer's.

"Your life has touched and helped so many... I thank God for you. I was saddened that more people didn't attend the workshop. Life-saving therapy was in reach for so many - but so few in the Denver/Boulder area responded. Thank you for your dedication and courage to keep trying to bring the good news to the afflicted.

"In appreciation, (signed) Bob Jones." *

Extraordinary Results at Oasis of Hope

By Charlotte Gerson

We are long used to the sad fact that a large percentage of patients arriving at the Gerson Therapy treatment centers are in terminal condition. Even so, it is ever so gratifying to see many of those improve considerably, and a good percentage recover completely.

So when we have unusually fast results or far-reaching improvements in some patients, it is a cause to celebrate. Two such patients were recently at the hospital.

A gentleman, not quite 70, pre-

sented suffering from prostate cancer. Even though he had already been diagnosed some 10 years ago, hormone treatments had kept the cancer under control. However, he also proved my theory that stress does not necessarily cause cancer, but what we do to ourselves because of stress is what does the damage. During the past year, he had some unusual stress. As a result, he omitted his regular meals, and ordered coffee and cake in their place. He also stifled his hunger with considerable amounts

of chocolate. It is easy to visualize that this 'diet' caused extensive worsening of his condition and his PSA jumped up.

Aside from this specific problem, the patient had some long-standing complaints. For years, he regularly had night sweats, often as frequently as three times a night. He had also sustained an injury to his foot; a heavy object had fallen on it many years ago. Since that time, he had suffered from edema in that leg. He didn't consider this much of a problem since his sister also suffers from swollen legs, as did his mother for many years. Furthermore, he had regular nosebleeds for about 6 weeks every morning upon awakening. He even had headaches many times and started to be apprehensive about his frequent

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Extraordinary Results at Oasis...

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heart arrhythmias. These had increased in recent months. Additionally, he also had suffered several surgeries to remove a small skin cancer on a bald area of his scalp. Recently, a new scab and sore had developed; a new skin cancer was growing.

In only two weeks, with some of the symptoms vanishing sooner! ALL the above problems had disappeared. However, his prostate cancer will take longer.

The other patient who had extraordinarily prompt results is a young lady who is 34 years of age. For 14 years, she has suffered from rheumatoid arthritis. (Her father is a surgeon). She was treated with gold injections for four years; she also had several shots of chemotherapy (methatrexate) with the reasoning that rheumatoid arthritis is an "auto-immune" disorder. Therefore treatment had to be "kill the immune system" with a chemo drug, though there was constant worsening of her condition. When we first saw her, she had painful, red, swollen joints virtually everywhere in her body. It was in her fingers and knuckles,

her wrists and elbows, her shoulders and cervical spine, her hips and knees, her big toe and the balls of her feet, which were particularly painful. She was taking a lot of pain relief medicine, but complained of very severe stiffness in virtually all her joints in the mornings upon awakening--in spite of the drugs. Within three weeks, she became free of pain, and got off all painkiller drugs. All the redness (inflammation) and most of the swelling has gone from her joints; they are soft and pliable. The balls of her feet are still somewhat sensitive - but aside from that, she is in almost perfect condition.

It is important to note and repeat that the Gerson Therapy is not just a cancer therapy. When true healing takes place, all the metabolic degenerative conditions are cleared up as one cannot heal selectively. *

Oasis of Hope Hospital in Mexico, is the only medical facility providing Gerson care that is licensed by the Gerson Institute.

Tidbits for Cancer Patients

By Charlotte Gerson

I am generally opposed to the use of any vaccine on a cancer patient for the following reason:

The reason for using a vaccine is to establish an immune response by the body. In order to do so, weakened disease-causing bacteria or tissue of the desired material to which immunity is to be established is introduced. The problem with attempting this method is that, in order to produce this response, there has to be a reasonably viable immune system in place. The difficulty in attempting to obtain an immune response in a cancer patient is that their immune system is weakened to a point where it is not responding. If that were not so, their immune system would not have allowed malignant tissue to develop in the first place. In my opinion, vaccinating a cancer patient with his own type of tumor is like trying to beat a dead horse into action.

For that reason, it didn't surprise me when, during the last week of May, an announcement was made that the Immunex Corporation had stopped research on a melanoma vaccine. The results of their experiments showed that the vaccine was not only ineffective, but also caused patients to die sooner than the controls who were given Interferon. The corporation's stocks fell sharply as a result.

It is true that in a few cases, vaccines have worked to a degree, even in cancer patients. My guess is, however, that melanoma patients especially tend to be seriously toxic and unable to respond without powerful support of their immune system and intensive

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[The Gerson Institute is also known as, Cancer Curing Society, in some donation campaigns.]

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Gerson Institute at:
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Tidbits for Cancer Patients

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detoxification of the whole body. The Gerson Therapy fulfills both of these needs - and this is a major reason why the Therapy is so effective in curing melanoma.

Here is some good news. In our **Gerson Healing Newsletter** of Sep/Oct 1999, (Vol.14, #5) our members may have read a wonderful recovered patient story. A lady living in Australia, Miriam Vernon, who had been suffering from Stage IV, recurrent melanoma in 1991, given little chance of survival, engaged in the Gerson Therapy on her own at home and recovered. After some exceptionally stressful times (probably including getting off the Therapy completely) she developed new tumors, and new melanoma in 1995. She reverted to the Gerson Therapy and got well again.

We were excited and happy to receive a faxed copy from her the other day of a most recent follow-up, including scans of her entire rump "from lung apices [tip of her lungs] to pubic symphysis [the bottom of her pubic bone] during contrast infusion. Also included were scans of the thorax presented on both mediastinal and pulmonary windows. There is no evidence of significant lymphadenopathy [swollen lymph nodes] in the chest, abdomen, or pelvis. No focal pulmonary lesions are seen. There is no evidence of metastatic disease in the liver. The other abdominal organs and retroperitoneal structures appear normal. **Comment:** *No evidence of metastatic disease.*

The report was signed: Dr. Tony Bretherton) We don't often see a 5-year follow-up report on Gerson patients. Therefore we are especially grateful to Miriam for sharing the above report with us.

The other day, a discussion came up about the well-known chemotherapy agent, 5-FU. Its full registered trade name is Fluorouracil, or fluorinated pyrimidine. Its chemical name is 5-fluoro-2, 4, - pyrimidineamide, and it has probably been used for many years, perhaps more than two decades. I looked it up in the *Physicians' Desk Reference (PDR)*, a 3,000 page volume that lists all pharmaceutical drugs used in medical practice.

In view of the fact that the Food and Drug Administration (FDA) purports to control all drugs and only allows those that are "safe and effective," I would like you to consider the following, as found under the heading of "Fluorouracil":

"The effect of Fluorouracil may be to create a thiamine (a vitamin) deficiency which provokes unbalanced growth and death of the cell. "Fluorouracil is a highly toxic drug with a narrow margin of safety. Severe hematological (blood) toxicity, gastro-intestinal hemorrhage (bleeding) and even death (!) may result from the use of Fluorouracil, despite meticulous selection of patients and careful adjustment of dosage". •

I Hope You Dance

(Mark D. Sanders, Tim Sillers)

We at the Gerson Institute believe that sometimes when life's trials and accompanying stresses seem too much to bear, a little inspiration goes a long way towards lifting the spirit and giving encouragement to the heart. In keeping with this belief, we would like to share with our readers the lyrics of the current country hit "I Hope You Dance" sung by Lee Ann Womack on MCA Nashville Records.

*I hope you never lose
your sense of wonder,*

*You get your fill to eat but always
keep that hunger,*

*May you never take
one single breath for granted,*

*GOD forbid love ever leave you
empty handed,*

*I hope you still feel small when
you stand beside the ocean,*

*Whenever one door closes
I hope one more opens,*

*Promise me that you'll give faith
a fighting chance,*

*And when you get the choice
to sit it out or dance.*

*I hope you dance....
I hope you dance,*

*I hope you never fear those
mountains in the distance,*

*Never settle for
the path of least resistance,*

*Livin' might mean takin' chances
but they're worth takin',*

*Lovin' might be a mistake
but it's worth makin',*

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Fast-Food Chains Pull Monsanto's Biotech Spud

By Scott Kilman

Wall Street Journal
April 28, 2000

Monsanto Co.'s genetically modified potato is falling victim to the consumer backlash over crop biotechnology. Fast-food chains such as McDonald's Corp. are quietly telling their french-fry suppliers to stop using the potato from Monsanto, the only biotechnology concern to commercialize a genetically modified spud. So many food concerns are shrinking from the Monsanto potato that J.R. Simplot Co., a major supplier of french fries to McDonald's, is instructing its farmers to stop growing it.

"Virtually all the [fast food] chains have told us they prefer to take non-genetically modified potatoes", said Fred Zerza, spokesman for closely held J.R. Simplot, headquartered in Boise, Idaho.

Monsanto, the St. Louis agricultural unit of Pharmacia Corp., calls its potato "NewLeaf." It is the latest and smallest crop to feel the sting of a growing anti-biotechnology campaign in the U.S. and abroad.

Critics have raised enough questions about the environmental and nutritional safety of crop biotechnology that surveys show many U.S. consumers want labels on groceries containing genetically modified ingredients, a move the food industry resists.

American farmers, worried by the controversy, are retreating from the genetically modified seed they

raced to embrace in the late 1990s. Such modified plants are easier to grow than their conventional cousins; they make their own insecticides and tolerate exposure to potent weed-killers. But government and industry surveys show that U.S. farmers plan to grow millions fewer acres of genetically modified corn, soybeans and cotton than they did last year.

Potato farmers quickly accepted Monsanto's genetically modified version when it was introduced four years ago. Equipped with a gene from a microorganism, the NewLeaf plant makes a toxin that repels a major pest called the Colorado Potato Beetle, greatly reducing the need for expensive chemical sprays. U.S. farmers planted about 50,000 acres of NewLeaf potatoes last year, up from 10,000 acres in 1996. Total U.S. potato production last year was about a million acres.

Now, with food companies shrinking from the genetically modified potato, NewLeaf acreage will likely drop significantly this year.

Fargo, N.D., farmer Ronald Offutt, one of the nation's largest producers of potatoes, said he won't raise any genetically modified spuds this year. Last year, about 20% of the potatoes grown by his company, R.D. Offutt Co., were genetically engineered. Mr. Offutt said he decided to eliminate the NewLeaf potato after Cincinnati consumer-products giant Procter & Gamble Co. asked how long it

would take him to supply the company with only conventional potatoes. Mr. Offutt supplies potato flakes for making P&G's Pringles chips.

P&G declined to comment.

Frito-Lay Co. said yesterday that it is asking its farmers not to grow genetically-modified potatoes this year. Frito-Lay makes potato-chip brands Lay's and Ruffles. Frito-Lay, a Plano, Texas, unit of soft drink giant PepsiCo Inc., told its corn farmers this past winter to stop growing genetically modified varieties for use in its snack products.

Crop biotechnology is a delicate issue for food companies. Most executives believe the technology is safe but many customers are turned off by the idea of genetic manipulation.

NewLeaf potatoes are being sacrificed in large part because they're the easiest genetically modified crop to remove: the vast majority of spuds grown last year were conventional.

It's far harder for the food industry to reject genetically modified soybeans, for example, because they represent half of the U.S. crop and are used to make many more food ingredients.

McDonald's declined to talk about its potato policy. A spokesman said the company doesn't comment on its procurement practices.

The Burger King unit of London's Diageo PLC said suppliers have assured it that the french fries it sells aren't made from genetically modified potatoes.

Hardee's, a fast food chain of CKE Restaurants Inc., said it hasn't asked suppliers to stop using genetically modified potatoes. But the chain is considering whether to change its french-fry policy. •

Novartis® Phasing Out Genetically Engineered Foods

By Neville Judd

Environment News Service
August 4, 2000

CAPE COD, Massachusetts -- Novartis, one of the world's leading producers of genetically engineered seeds, has been phasing out genetically engineered ingredients in its food products worldwide for over a year.

Responding to a statement issued by environmental group Greenpeace International yesterday, Novartis Consumer Health U.S. vice president Sheldon Jones told ENS there is nothing new about the company's stand on genetically engineered food.

Greenpeace cited a letter sent by Novartis' European Consumer Health department as evidence the company had stopped producing food containing genetically engineered ingredients in its own brands on June 30.

In particular, the letter stated production of the candy bar Cereal Chocosoja had been stopped because Novartis could not guarantee its non-GM quality.

"The first I knew about this Greenpeace business was when NBC called me last night," said Jones, speaking from a mobile phone on a beach in Cape Cod. "I was stunned."

"Months ago, over a year ago in fact, Novartis decided that wherever possible it would try to eliminate genetically enhanced ingredients from its products, like baby food

and nutritional products."

Headquartered in Basel, Switzerland, Novartis operates through 275 affiliates in 142 countries worldwide, and is behind household names such as Gerber baby food and Maalox.

"The decision was not taken because we think GM technology is unsafe, on the contrary, we are convinced of its safety. But we did not want names like Gerber thrown about in the debate. It is a response to customer concerns and with baby food in particular there are highly sensitive issues involved," Jones said.

Jones said the company had not announced the decision officially because it did not want to use it as a marketing ploy. "We refuse to say we are GMO [genetically modified organism] free because cross pollination makes it highly unlikely that any sizeable food producer could be," said Jones.

"What Greenpeace said yesterday is not necessarily wrong," said Jones, "it's just not news."

Greenpeace applauded the Novartis' decision, claiming it is the first multinational company to commit to a genetically engineered (GE) free standard in food on a global basis. But it criticized Novartis for continuing to produce and sell genetically modified maize (corn) to farmers.

"Novartis should also recognize the environmental risks its GE agricultural products carry and become

consistent in its policy by stopping the production and sale of GE seeds," said Isabelle Meister, Greenpeace International genetic engineering campaigner.

Genetically engineered food made from plants whose gene sequence has been altered for certain qualities, such as resistance to pesticides, or a higher vitamin count, is at the center of a contentious public debate.

Some consumers and environmentalists fear the new technology could pose a threat to human health or to natural varieties of plants.

A typical comment of concern was made by Dr. Vyvyan Howard, expert in infant toxico-pathology at Liverpool University Hospital, in the UK. "Swapping genes between organisms can produce unknown toxic effects and allergies that are most likely to affect children," the doctor said in 1998.

Critics of biotech foods also warn that genetically modified crops growing in the fields possibly can harm wild species by poisoning insects and animals as well as changing the genetic makeup of nearby plants through pollination.

The 15-member European Union (EU) recently proposed an end to a two year moratorium on granting new authorizations for genetically modified crops. Some 18 crops are currently stalled in the EU's authorization procedure, including a Novartis genetically modified maize.

Australia and New Zealand this week joined European countries by approving the labeling of foods containing even the smallest percentage of genetically engineered crops. *